



CLETS MISUSE INVESTIGATION REPORTING

Calendar Year _____

Regardless of whether your agency had any reported misuse, submit this form by February 1 of each year for the previous calendar year. Include the number of investigations performed related to CLETS misuse and include any disciplinary action taken, if applicable.

Agency Name _____

Address _____

Person Completing Form _____

Telephone Number _____ County _____

1. Total number of investigations performed related to CLETS misuse:
- a. Pending _____ + b. Closed _____ = Total Performed _____
(1a + 1b = 2a + 2b + 2c)
2. Of the total number of investigations performed, how many originated from:
- a. Private citizen complaints _____
- b. Internal within your department _____
- c. From another agency _____
3. Number of each type of action taken on misuse violations:
- a. No action taken _____
- b. Administrative action:
- | | | |
|-------------------|-------------------|------------------|
| Counsel _____ | Reprimand _____ | Suspension _____ |
| Resignation _____ | Termination _____ | Other _____ |
- c. Criminal complaints filed:
- | | | |
|------------------|-------------------|--------------|
| Infraction _____ | Misdemeanor _____ | Felony _____ |
|------------------|-------------------|--------------|
- d. Number of convictions from criminal complaints filed:
- | | | |
|------------------|-------------------|--------------|
| Infraction _____ | Misdemeanor _____ | Felony _____ |
| Unknown _____ | | |
4. Total misuse violations found from investigations: _____
(3a + 3b + 3c + 3d)

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